

*Department of Energy  
Indemnity Approval*

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The following criteria were used in evaluating the indemnity request by \_\_\_\_\_. Recommend (CHECK ONE) DOE-ARG ☐ / DOE-HQ ☐ approval based upon the risks evaluated and identified below, as well as attached information (indemnity provision, statement of work, etc.)

- |    |                              |                             |   |
|----|------------------------------|-----------------------------|---|
| 1. | YES <input type="checkbox"/> | NO <input type="checkbox"/> | The action presents a low risk of significant liability to Argonne National Laboratory, or  |
| 2. | YES <input type="checkbox"/> | NO <input type="checkbox"/> | is primarily associated with the transfer of information.   |
| 3. | YES <input type="checkbox"/> | NO <input type="checkbox"/> | The action is required to promote the mission of the Laboratory.  |
| 4. | YES <input type="checkbox"/> | NO <input type="checkbox"/> | All reasonable possibilities (i.e., insurance) were pursued to avoid the indemnity language.  |
| 5. | YES <input type="checkbox"/> | NO <input type="checkbox"/> | The indemnity language does not indemnify the award recipient for liability resulting from their own acts or omissions.                             |
| 6. | YES <input type="checkbox"/> | NO <input type="checkbox"/> | The indemnity stipulates that Government Liability is subject to availability of funds under the Prime Contract at the time the contingency occurs. |
| 7. | YES <input type="checkbox"/> | NO <input type="checkbox"/> | Indemnity language does not imply that Congress will, at a later date, appropriate funds sufficient to meet deficiencies under the Prime Contract.  |
| 8. | YES <input type="checkbox"/> | NO <input type="checkbox"/> | The indemnity makes prudent business sense.   |

*(If the answer to any question is "No", provide additional comments on the reverse side of this form to support subsequent DOE action)*

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*ANL Signature*

*Date*

*Extension*

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*ANL Legal Signature*

*Date*

*Extension*

*DOE-ARG*

☐ *Approved*

☐ *Disapproved*

☐ *Forwarded to DOE-HQ for Action*

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*DOE-ARG Signature*

*Date*

*Extension*

## *INDEMNITY APPROVAL INSTRUCTIONS*

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1. Complete the Department of Energy (DOE) Indemnity Approval Form.
2. If any question is “No”, additional comments should be provided on the review form.
3. Identify in the “Comments” area the name, title and phone number of the person that refused to accept insurance in lieu of indemnity language.
4. Forward the Indemnity Form with the Indemnities in article attached to ANL Legal for comment and review prior to forwarding it to DOE for approval.
5. ANL Management should sign out all forms via a Request for Approval of Subcontract or P.O. Action (PD-2)
6. DO NOT award until DOE direction is received.

*COMMENTS:*